

Date:

Type of Event:

Activity/site being checked:

Location:

Name of person doing the check:

Signature:

Item being checked	Meets Standard (Y/N)	Action required
Is the site secure for horses (no road access, adequate fencing of hazards, stallion separation fencing etc)?		
Is there enough parking space to accommodate vehicles with horses tied either side and/or sufficient pens?		
Is there good space for traffic flow?		
Is there enough space for 40x20m dressage arena for a competition day?		
Is there sufficient space away from the arena sides and between obstacles in the EOH and speed area competition courses?		
Does the timing of attendees using the facilities adhere to maximum capacity of the venue for parking and number of horses allowed?		
Does the warm up area space comply with WENZ guidelines and If lunging is allowed is there space to separate the lunging area?		
Do the dressage and obstacle area fencing/ropes comply with WENZ guidelines?		
Does the obstacle construction and ground fixing comply with WENZ guidelines?		
Has the site been assessed for hazards, a Hazard Board completed and displayed in an easily visible manner?		
Has a H&S sign in and emergency contact form for participants been made available? (Please note the location of the sign in)		

Are there Hazard Identification forms available for the reporting of Hazards? (Please note the location of the forms)		
Has the Emergency Contact List for assistance (Vets, Medical etc) been completed? (Please note the location of the list)		
Is there an identified person, skilled in First Aid coming to the event? (Please note the allocated person)		
Is there a human First Aid Kit centrally located? (Please note the location)		
Is there an Emergency/Evacuation Plan? (Please note the location)		
Will participants be made aware of the rules regarding the wearing of hard hats for this event?		
Are there any specific H&S requirements for your event on this date? (such as obstacle repairs to be investigated, new or temporary hazards, updates to locations of forms, volunteer briefing time, location, and person doing the briefing, etc)?		
Date:		
By Whom:		

**Please note that this form must be completed before the start of the event. It must be kept for your individual or group records and will be part of any insurance records to be submitted. You must Register your event by using the form [WENZ Health and Safety](#)**